

**IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT
SANGAMON COUNTY, ILLINOIS**

ROGER KANERVA, et al., on behalf of a Class
of Persons Similarly Situated,

Plaintiffs,

-vs-

MALCOLM WEEMS, Director of the Illinois
Dept. of Central Management Services; et al.,

Defendants.

)
) Sangamon County No. 2012-
) MR-582 and 2013-MR-408
) consolidated with
) Sangamon Co. No. 2012-
) L-162; Randolph Co. No.
) 2012-L-35; and Madison Co.
) No. 2012-L-987
)
)
)

OPT OUT NOTICE

If you have decided to opt out of the Certified Class of Plaintiffs in this litigation, you must complete this form (including your address and telephone number), sign it, have your signature notarized, and, ON OR BEFORE MARCH 11, 2015, either mail the original to Donald M. Craven, 1005 N. 7th St., Springfield, IL 62702, or scan the original and e-mail it to don@cravenlawoffice.com.

[Note: If you elect not to opt out and you remain a member of the Certified Class, your net refund of the contested health insurance premiums in this case will be sent to you at your address maintained by your retirement system, or based on your financial account information maintained by that system.]

By signing this notice and electing to be excluded from the Certified Class, you agree to and represent to the Court that you understand the following terms:

1. You will not be eligible for a refund of premiums withheld from your pension payments pursuant to the authority of Public Act 97-695 and 80 Ill. Admin. Code § 2200.520 as part of the proceedings of this case.
2. Any premiums withheld from your annuity (including any escrowed funds held pursuant to court orders) that would be refunded to you as part of this case will instead be placed in the Health Insurance Revolving Fund administered by the Illinois Department of Central Management Services and will no longer be subject to the jurisdiction of the Court in this case.
3. If you seek a refund of premiums withheld from your pension payments pursuant to the authority of P.A. 97-695 and 80 Ill. Admin. Code § 2200.520 in a separate action, you will be responsible for your attorney's fees and costs in that litigation, and all defenses (including the defense of sovereign immunity that the State has waived for refunds in these cases) may be available to the defendants in that separate action.

I understand the terms of this Notice, and choose to opt out of the Certified Class, waiving my right to obtain a refund in this litigation.

Printed name: _____

Retirement system _____

Address: _____

(SERS, SURS, TRS, GARS or JRS)

Telephone: _____

Signature

SIGNED BEFORE ME THIS ____ DAY OF _____, 2015

NOTARY PUBLIC

(SEAL)

Note: failure to provide all requested information may result in opt-out being denied.